

Capacity: Owner

(see instruction #8 on back of form)

## CERTIFICATE OF ASSUMED BUSINESS NAME

Pursuant to Section 53-504, Idaho Code, the undersigned submits for filing a certificate of Assumed Business Name.

Please type or print legibly.

NOTE: See instructions on reverse before filing.



1018740

The assumed business name which the ur	ndersigned use(s) in the transaction of
business is: <u>Armando's Restaurant</u>	
2. The true name(s) and <u>business</u> address(es business under the assumed business nam Name  Armando Coballos	ne: <u>Complete Address</u>
3. The general type of business transacted u	inder the assumed business name is:
Retail Trade	Submit Certificate of Assumed Business Name and \$20.00 fee to:  Secretary of State 700 West Jefferson Basement West PO Box 83720 Boise ID 63720-0080 208 334-2301
	Secretary of State use only
Signature: Armando Ceballos	10AHO SECRETARY OF STATE  10/02/2001 05:00  10/02/2001 05:00  CK: 3133 CT: 151929 BH: 422621  1 9 20.00 = 20.00 ASSUM NAME # 2